

POSITIONING OF LOWER EXTREMITIES ARTIFICIAL PROPRIOCEPTORS

CROSS-REFERENCE TO RELATED APPLICATION

The present application claims the benefits of U.S. provisional patent application No. 60/405,281 filed August 22, 2002, which is hereby incorporated by reference.

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TECHNICAL FIELD

The present invention relates to the positioning of lower extremities artificial proprioceptors for use with a control system and/or a method for controlling an actuated prosthesis. This invention is particularly well adapted for controlling an actuated leg prosthesis for above-knee amputees.

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BACKGROUND

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As is well known to control engineers, the automation of complex mechanical systems is not something easy to achieve. Among such systems, conventional powered artificial limbs are notorious for having control problems. These conventional prostheses are equipped with basic controllers that artificially mobilize the joints without any interaction from the amputee and are only capable of generating basic motions. Such basic controllers do not take into consideration the dynamic conditions of the working environment, regardless the fact that the prosthesis is required to generate appropriate control within a practical application. They are generally lacking in predictive control strategies necessary to anticipate the artificial limb's response as well as lacking in adaptive regulation enabling the adjustment of the control parameters to the dynamics of the prosthesis. Because human limb mobility is a complex process including voluntary, reflex and random events at the same time, conventional prostheses do not have the capability to interact simultaneously with the human body and the external environment in order to have minimal appropriate functioning.

Considering this background, it clearly appears that there was a need to provide the capability to interact simultaneously with the human body and the external

environment to a control systems and/or methods for controlling a dynamic prosthesis in order to fulfill the needs of amputees, in particular those of above-knee amputees.

SUMMARY

5 In accordance with one aspect of the present invention, there is provided a method of controlling an actuating mechanism of a prosthesis provided on one side of the lower body of an individual, the individual having a healthy leg on the other side, the method comprising:

10 providing a plurality of artificial proprioceptors, at least one of the artificial proprioceptors being on the side of the healthy leg, and at least one of the artificial proprioceptors being on provided with the prosthesis;

generating data signals in real time at the artificial proprioceptors; and

generating control signals in real time for controlling the actuating mechanism in response to the data signals.

15 In accordance with another aspect of the present invention, there is provided a device for controlling an actuating mechanism of a prosthesis provided on one side of the lower body of an individual, the individual having a healthy leg on the other side, the device comprising:

20 a plurality of artificial proprioceptors, at least one of the artificial proprioceptors being on the side of the healthy leg, and at least one of the artificial proprioceptors being on the side of the prosthesis;

means for generating data signals in real time at the artificial proprioceptors; and

means for generating control signals in real time for controlling the actuating mechanism in response to the data signals.

In accordance with a further aspect of the present invention, there is provided a lower extremities prosthesis provided on one side of the lower body of an individual, the individual having a healthy leg on the other side, the prosthesis comprising:

a plurality of artificial proprioceptors, at least one of the artificial proprioceptors being on the side of the healthy leg, and at least one of the artificial proprioceptors being on
5 provided with the prosthesis;

means for generating data signals in real time at the artificial proprioceptors;

at least one actuating mechanism; and

means for generating control signals in real time for controlling the actuating
10 mechanism in response to the data signals.

These and other aspects of the present invention are described in or apparent from the following detailed description, which description is made in conjunction with the accompanying figures.

BRIEF DESCRIPTION OF THE FIGURES

15 FIG. 1 shows the lower body of an individual provided with a prosthesis on one side and having a healthy leg on the other side.

FIG. 2 is a block diagram showing a control system for a prosthesis having an actuating mechanism.

20 FIG. 3 is an upper schematic view of an insole provided with plantar pressure sensors.

FIG. 4 is a cross sectional view of a sensor shown in FIG. 3.

FIGS. 5a to 5d are examples of four data signals using plantar pressure sensors during typical walking on flat ground.

25 FIGS. 6a to 6d give an example of a data signal obtained from a plantar pressure sensor at the calcaneus region and its first three differentials.

FIGS. 7a to 7d give an example of a data signal obtained from a plantar pressure sensor at the metatarsophalangeal (MP) region and its first three differentials.

FIGS. 8a to 8d give an example of the zero crossings for a typical localized plantar pressure signal, and its first three differentials, at the calcaneous region conditions.

- 5 FIGS. 9a to 9c give an example of the zero crossings for a typical localized plantar pressure signal, and its first three differentials, at the metatarsophalangeal (MP) region.

DETAILED DESCRIPTION

10 The appended figures show positioning of lower extremities artificial proprioceptors (20) for use with a control system (100) and a method for controlling a prosthesis (14) having an actuating mechanism (16) in accordance with the preferred embodiment of the present invention. It should be understood that the present invention is not limited to the illustrated implementation since various changes and modifications may be effected herein without departing from the scope of the appended claims.

15 FIG. 1 shows a prosthesis (14) provided on one side of the lower body of an individual (10), the individual (10) having a healthy leg (12) on the other side. Artificial proprioceptors (20) are provided both on the healthy leg (12) and on the prosthesis (14). The prosthesis (14) comprises an actuating mechanism (16) which may be either passive or active. A passive actuating mechanism may be generally defined as
20 an electro-mechanical component that only absorbs mechanical energy in order to modify dynamics of mechanical joints of the prosthesis, while an active actuating mechanism may be generally defined as an electro-mechanical component that absorbs and supplies mechanical energy in order to modify dynamics of mechanical joints of the prosthesis.

25 An example of a passive actuating mechanism is described in U.S. patent application No. 09/767,367, filed January 22, 2001, entitled "ELECTRONICALLY CONTROLLED PROSTHETIC KNEE". Examples of active actuating mechanisms are described in U.S. patent application No. 10/463,445 filed June 17, 2003, entitled "ACTUATED

PROSTHESIS FOR ABOVE-KNEE AMPUTEES", by Stéphane Bédard et al., the entire disclosure of which is hereby incorporated by reference herein.

FIG. 2 shows the control system (100) being combined with artificial proprioceptors (20) and a prosthesis (14) having an actuating mechanism (16), such as shown in

5 FIG. 1. The purpose of the control system (100) is to provide the required signals allowing to control the actuating mechanism (16). To do so, the control system (100) is interfaced with the amputee (10) using the artificial proprioceptors (20) to ensure proper coordination between the amputee (10) and the movements of the prosthesis (14). The set of artificial proprioceptors (20) captures information, in real time, about
10 the dynamics of the amputee's movement and provide that information to the control system (100). The control system (100) is then used to determine the resistance to be applied to a joint, in the case of a passive actuating mechanism, or the joint trajectories and the required force or torque that must be applied by a joint, in the case of an active actuating mechanism, in order to provide coordinated movements.

15 It should be noted that the present invention is not limited to its use with the mechanical configuration illustrated in FIG. 1. The control system (100) may be used with a leg prosthesis having more than one joint. For instance, it may be used with a prosthesis having an ankle joint, a metatarsophalangeal joint or a hip joint in addition to a knee joint. Moreover, instead of a conventional socket a osseointegrated
20 devices could also be used, ensuring a direct attachment between the mechanical component of the prosthesis and the amputee skeleton. Other kinds of prostheses may be used as well.

The control system (100) shown in FIG. 2 comprises an interface (30) through which data signals coming from the artificial proprioceptors (20) are received. They may be
25 received either from an appropriate wiring or from a wireless transmission. The data signals from the artificial proprioceptors (20) provided on a healthy leg (12) are advantageously sent through the wireless transmission using an appropriate radio frequency (RF) module. Of course, other combinations of communication link technologies may be used, such as wired, wireless, optical, etc.

Software residing on a controller (40) contains all the algorithms enabling the control system (100) to provide the required signals allowing to control the actuating mechanism (16).

5 The artificial proprioceptors (20), located on both the healthy leg (12) and the prosthesis (14), may include myoelectric sensors, neuro-sensors, kinematic sensors, kinetic sensors or plantar pressure sensors. Myoelectric sensors are electrodes used to measure the internal or the external myoelectrical activity of skeletal muscles. Neuro-sensors are electrodes used to measure the summation of one or more action potentials of peripheral nerves. Kinematic sensors are used to measure the position
10 of articulated joints, the mobility speed or acceleration of lower extremities. Kinetic sensors are used to measure rotational forces at the articulated joints or reaction forces of lower extremities. Plantar pressure sensors are used to measure the vertical plantar pressure of a specific underfoot area. Of course, additional types of sensors which provide information about various dynamics of human locomotion may
15 be used. For a given application, the use of artificial proprioceptors (20) is not restricted to a specific type of sensor, multiple types of sensors in various combinations may be used.

The controller (40) ensures, in real-time, the decomposition of the locomotion of an individual (10) based on the information provided by the artificial proprioceptors (20).
20 In accordance with the present invention, it was found that data signals received from individual artificial proprioceptors (20) located on both the healthy leg (12) and the prosthesis (14) of an individual (10) can provide enough information in order to control the actuating mechanism (16) of the prosthesis (14). For instance, in the case of plantar pressure sensors, it has been noticed experimentally that the slope (first
25 derivative), the sign of the concavity (second derivative) and the slope of concavity (third derivative) of the data signals received from plantar pressure sensors, and of combinations of those signals, give highly accurate and stable information on the human locomotion and enable the decomposition of the human locomotion into a finite number of portions. This breakdown ensures the proper identification of the
30 complete mobility dynamics of the lower extremities in order to model the human

locomotion. Of course, the use of plantar pressure sensors is given as an example and does not limit the definition of artificial proprioceptors to such sensors.

EXAMPLE

In a sample application, the artificial proprioceptors (20) may comprise localized
 5 plantar pressure sensors, which measure the vertical plantar pressure of a specific
 underfoot area, combined with a pair of gyroscopes which measure the angular speed
 of body segments of the lower extremities and a kinematic sensor which measures
 the angle of the prosthesis (14) knee joint. The plantar pressure sensors are used
 under both feet, the foot of the healthy leg (12) as well as the foot of the prosthesis
 10 (14). One of the gyroscopes is located at the shank of the healthy leg (12) while the
 other is located on the upper portion of the prosthesis (14) above the knee joint, i.e. at
 the residual thigh. As for the kinematic sensor, it is located at the prosthesis (14)
 knee joint. Of course, the use of plantar pressure sensors, gyroscopes and kinematic
 sensors is given as an example and does not limit the definition of artificial
 15 proprioceptors to such sensors.

In FIG. 4, the plantar pressure sensors (20) are provided in a custom-made insole
 (18), preferably in the form of a standard orthopedic insole, that is modified to embed
 the two sensors (20) for the measurement of two localized plantar pressures. Each
 sensor (20), as shown in FIG. 5, is preferably composed of a thin Force-Sensing
 20 Resistor (FSR) polymer cell (22) directly connected to the interface (30) or indirectly
 using an intermediary system (not shown), for instance a wireless emitter. The FSR
 cell (22) has a decreasing electrical resistance in response to an increasing force
 applied perpendicularly to the surface thereof. Each cell (22) outputs a time variable
 electrical signal for which the intensity is proportional to the total vertical plantar
 25 pressure over its surface area. The size and position of the plantar pressure sensors
 (20) were defined in accordance with the stability and the richness (intensity) of the
 localized plantar pressure signals provided by certain underfoot areas during
 locomotion.

Experimentation provided numerous data concerning the spatial distribution of foot
 30 pressures and more specifically on the Plantar Pressure Maximal Variation (PPMV)

during locomotion. The PPMV was defined as the maximum variation of the plantar pressure at a particular point (underfoot area of coordinate i,j) during locomotion. The X-Y axis (19) in FIG. 3 was used to determine the i,j coordinates of each underfoot area. It was found by experimentation that the calcaneus and the

5 Metatarsophalangeal (MP) regions are two regions of the foot sole where the PPMV may be considered as providing a signal that is both stable and rich in information.

The normalized position of the pressure sensors and their size are shown in Table 1, where the length L and the width W are respectively the length and the width of the subject's foot. The coefficients in Table 1 have been obtained by experimentation. A

10 typical diameter for the plantar pressure sensors (20) is between 20 and 30 mm.

Table 1 - Normalized position and size of plantar pressure sensors

Area	Position (X, Y)	Size (diameter)
Calcaneus	$(0.51 \cdot W, 0.14 \cdot L)$	$0.29 \cdot \sqrt{L \cdot W}$
MP	$(0.47 \cdot W, 0.76 \cdot L)$	$0.24 \cdot \sqrt{L \cdot W}$

FIGS. 5a to 5d show examples of data signals from the four localized plantar pressure sensors (20) during a standard walking path at 109,5 steps/minute. The four signals, $f_1(t)$, $f_2(t)$, $f_3(t)$ and $f_4(t)$, correspond to the variation in time of the localized plantar

15 pressure at the calcaneus region of the left foot (FIG. 5a), the MP region of the left foot (FIG. 5b), the calcaneus region of the right foot (FIG. 5c), and the MP region of the right foot (FIG. 5d).

FIGS. 6a to 6d and 7a to 7d show examples of graphs of localized plantar pressures, as well as their first, second and third differentials, at the calcaneus and MP regions

20 respectively, for a linear walking path of 109,5 steps/minute.

FIGS. 8a to 8d show graphically the zero crossings for a typical localized plantar pressure signal, and its first three differentials, at the calcaneus region conditions, which may be used by the controller (40) to compose the locomotion of the individual

25 (10), while FIGS. 9a to 9c do so for the localized plantar pressure signal, and its first

two differentials, at the MP region. This shows the relationships between the various data and derivative signals.

Accordingly, the controller (40) may use the four localized plantar pressure signals, the first, the second and the third differentials of each of those four localized plantar pressure signals, as well as the information gathered from the data signals of the two gyroscopes and the kinematic sensor, in order to decompose the locomotion of the individual (10) into a finite number of portions, and generate the controls signals for controlling the actuating mechanism (16) in response to the data signals. Of course, the controller (40) is not limited to the use of the preceding data and derived signals.

- 10 A controller (40) and control system (100) using artificial proprioceptors comprising plantar pressure sensors as well as gyroscopes and a kinematic sensor is described in U.S. patent application No. 10/600,725 filed June 20, 2003, which is entitled "CONTROL SYSTEM AND METHOD FOR CONTROLLING AN ACTUATED PROSTHESIS", by Stéphane Bédard, the entire disclosure of which is hereby
- 15 incorporated by reference herein.